PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 1994

Application or Docket Number

328165

CLAIMS AS FILED - PART I									CMALL ENTITY			OTHER THAN OR SMALL ENTITY	
FOE	· · · · · · · · · · · · · · · · · · ·		(Column 1)			(Column 2)			SMALL ENTITY				
FOR			NUMBER FILED		NUMBER EXTRA		┇	RATE	FEE		RATE	FEE	
BASIC FEE										365.00	OR		730.00
TOTAL CLAIMS				Š minu	ıs 20 =	*			x\$11=		OR	x\$22=	
INDEPENDENT CLAIMS				mir	ius 3 =	*			x38=		OR	x76=	
MULTIPLE DEPENDENT CLAIM PRESENT]	+120=		OR	+240=	
* If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL									OR	TOTAL	730		
										Un	ļ	7.7	
<u>al</u>	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						- <u>-</u>	SMALL ENTITY			OTHER THAN SMALL ENTITY		
AMENDMENT'A		CLA REMA AFT AMEND	INING ER		PRE	IGHEST UMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	* 8		Minus	**	20	= /		x\$11=		OR	x\$22=	
ME	Independent	*		Minus	***	3	=		x38=		OR	x76=	
٩	FIRST PRE	SENTAT	ENTATION OF MULTIPLE DEPENDENT CLAIM						+120=	,	OR	+240=	
								<u>-</u> 1Δ	TOTAL DDIT. FEE		OR /	TOTAL ADDIT. FEE	
							(Column 3)	م	DDII. I LL		,	AUUII. FEE I	
AMENDMENT B	CLAII REMAII AFTE AMENDI		NING ER		PRE	GHEST UMBER VIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	**		=		x\$11=		OR	x\$22=	
	Independent	*		Minus	***		=		x38=		OR	x76=	
⋖	FIRST PRESENTATION OF MULTIPLE				DEPE	DEPENDENT CLAIM			+120=		OR	+240=	
(Column 1) (Column 2) (Column 3) ADDIT. FEE										OR	TOTAL ADDIT. FEE		
		CLAI			- `		(Column 3)	1 r					
ENT C		REMAI AFT AMEND	NING ER		PRE	GHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	- 19	RATE	ADDI- TIONAL FEE
AMENDMENT	Total *		0	Minus **			=		x\$11=		OR	x\$22=	
	Independent *			Minus ***			=		x38=		OR	x76=	
∢.	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +120=									OR	+240=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." *** If the Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in Column 3.											TOTAL ADDIT. FEE		